## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L04000040411

1. Entity Name

JLO INVESTMENTS, LLC



FILED Apr 30, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

14021 S.W. 143 CT

14021 S.W. 143 CT

#6

DO NOT WRITE IN THIS SPACE

MIAMI, FL 33186

MIAMI, FL 33186



04282008 No Chg-LLC

CR2E083 (12/07)

	 \$5.00 Additional
20-4345838	Not Applicable
4. FEI Number	Applied For

<del>05/27/08-80012-024 138.75</del>

5. Certificate of Status Desired

\$5.00 Additiona Fee Required

6. Name and Address of Current Registered Agent

JOSE, LOPEZ 14021 S.W. 143 CT #6

MIAMI, FL 33186

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	The above named entity submits this statement for the purpose of ch the obligations of registered agent.	anging its registered office or registered agent, or bo	h, in the State of Florida.	I am familiar with, and accept
SI	SNATURE Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating)	UUUUUU938	M87

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LOPEZ, JOSE 14021 S.W. 143 CT. #6 MIAMI, FL 33186			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LOPEZ, BARBARA 14021 S.W. 143 CT. #6 MIAMI, FL 33186			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby certify that the information supplied with this filing does not qualify for the ex				

MANAGING MEMBERS/MANAGERS

## DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAMEDY-SIGNING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/35/08 786-486-681)
Date Daytime Proce #